

Applicant(s): Ron S. Israeli et al.

Serial No. : 08/403,803

Filed : March 17, 1995

For : PROSTATE-SPECIFIC MEMBRANE ANTIGEN



Examiner: S. Gucker

Group Art Unit: 1647

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

June 15, 2004

S I R:

Transmitted herewith is an amendment to the above identified application.

 X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement previously submitted.

 A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

 X No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
Total Claims	37	-	85	=	0	X	\$9	\$18	=	\$0	\$0
Indepen- -dent Claims	8	-	15	=	0	X	\$42	\$84	=	\$0	\$0
Multiple Dependent Claim(s) Presented <u> </u> Yes <u> X </u> No For First Time							\$140	\$280	=	\$0	\$0
							TOTAL ADDITIONAL FEE			\$0	

*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

**If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

***If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed

_____ Please charge Deposit Account No. 03-3125 in the amount of \$ _____. Three copies of this sheet is enclosed.

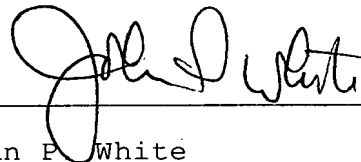
X A check in the amount of \$ 475.00 is enclosed, for a \$475.00 fee for a three-month extension of time.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposition Account No. 03-3125. Three copies of this sheet are enclosed.

X Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

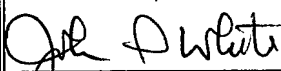
X Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,



John P. White
Registration No. 28,678
Attorney for Applicants
Cooper & Dunham LLP
1185 Avenue of the Americas
New York, New York 10036
(212) 278-0400

I hereby certify that this correspondence is being deposited this date with the U.S. postal Service with sufficient postage as first class mail in an envelope addressed to:
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John P. White Date
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